

'PART B - FEE(S) TRANSMITTAL

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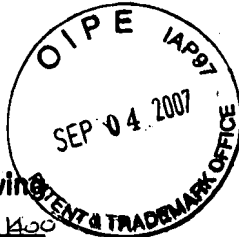
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21171 7590 06/01/2007

STAAS & HALSEY LLP
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1201 NEW YORK AVENUE, N.W.
WASHINGTON, DC 20005



The PTO did not receive the following listed item(s) Check for fee

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/380,146	06/03/2005	Herbert Barthel	1454.1013	8888

TITLE OF INVENTION: REDUNDANT ELECTRONIC DEVICE WITH CERTIFIED AND NON-CERTIFIED CHANNELS

**-- REDUNDANCY-BASED ELECTRONIC DEVICE HAVING
 CERTIFIED AND NON-CERTIFIED CHANNELS --**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	09/04/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
BONZO, BRYCE P	2113	714-011000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 **STAAS & HALSEY LLP**
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

SIEMENS AKTIENGESELLSCHAFT

MUNICH, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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☒ A check is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3935 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27. 09/05/2007 300003 000000-9 193935 (2) 89380146

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Mark J. Henry
 Typed or printed name **MARK J. HENRY**

Date Sept 4 2007
 Registration No. 36,162

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